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PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**PATENT APPLICATION** TRANSMITTAL
(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

First Inventor or Application Identifier CALVEZ ET AL.

Title Dispositifier procede d'authentifier d'un utilisateur a distance

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	Background of the Invention			to the control of above copies					
	- Brief Summary of the Invention			ACCOMPANYING APPLICATION PARTS					
	Brief Description of the Drawings (	if filed)	7. x	Assignm	ent Pap	ers (co	ver sheet & doo	:ument(s))	
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	Copy from a prior application (37.0.5.B. \$ 1.63(4))  [12. X. (Should be specifically itemized)]							ı	
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ł	i. DELETION OF INVENTOR(S)  Signed statement attached deleting  14. X Certified Copy of Priority Document(s)								
	inventor(s) named in	the prior application	14. X	(if foreign	Copy of	Priority ie clain	/ Document(s)	1//0	ı
l	see 37 C.F.R. §§ 1.63	3(d)(2) and 1.33(b).	15 X	Other:	Clai	im fo	ned) FR99 0 or Priori	£449	
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FOI CONTINUATION OF DIVISIONAL APPS only. The entire disclosure of the									
under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby i ncorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
	17. CORRESPONDENCE ADDRESS								
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)  Or  Correspondence address below									
Mana	Edward J. Kondrad		CI Dai Code I	abel nerej					
Name	MILES & STOCKBRIDGE, P.C.						$\dashv$		
Address	1751 Pinnacle Dri		500						ᅱ
	Molecul								コ
City	McLean U.S.	State	VA		Zip C	Code	22102-38		
Country	U.S.	Telephone	703/90	3-9000	]	Fax	703/610-	8686	$\neg$
Name (P	Name (PrintType) Edward P. Kondragki Registration No. (Attorney/Agent) 20.604								
Signature Signature Figh 8 2000									
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## Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number TRANSMIT Complete if Known ٩ **Application Number** Y 2000 February 8, 2000 Filing Date Patent fees are subject to annual revision. First Named Inventor Pierre CALVEZ ET AL Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. **Examiner Name** See 37 C.F.R. §§ 1.27 and 1.28. Group / Art Unit TOTAL AMOUNT OF PAYMENT (\$)860.00 Attorney Docket No. T2147-906343

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  Deposit	3. ADDITIONAL FEES  Large Entity Small Entity Fee Fee Fee Fee Fee Fee Code (\$) Code (\$)					
Account Number 501165		5 Surcharge - late filing fee or oath				
Deposit Account MILES & STOCKBRIDGE	127 50 227 2	5 Surcharge - late provisional filing fee or cover sheet.				
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Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	147 2,520 147 2,5	20 For filing a request for reexamination				
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FEE CALCULATION	115 110 215 5					
1. BASIC FILING FEE	116 380 216 19					
Large Entity Small Entity	117 870 217 43					
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107 480 207 240 Plant filing fee	120 300 220 150	Decreed for and bearing				
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114 150 214 75 Provisional filing fee	138 1,510 138 1,51	Desistan to read an array debte				
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2. EXTRA CLAIM FEES	141 1,210 241 605 142 1,210 242 605	11444				
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Total Claims	144 580 244 290					
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Multiple Dependent	123 50 123 50	Petitions related to provisional applications				
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Large Entity Small Entity Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40	Recording each patent assignment per property (times number of properties)	40			
103 18 203 9 Claims in excess of 20	146 690 246 34	i ming a submission after marrejection	<del></del>			
102 78 202 39 Independent claims in excess of 3	149 690 249 34	(37 CFR § 1.129(a))				
104 260 204 130 Multiple dependent claim, if not paid	140 000 240 04	For each additional invention to be examined (37 CFR § 1.129(b))				
109 78 209 39 ** Reissue independent claims over original patent	Other fee (specify)					
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)					
SUBTOTAL (2) (\$)	Reduced by Basic Filir	ng Fee Paid SUBTOTAL (3) (\$) 70				
SUBMITTED BY Complete (if applicable)						
Name (PrintType) Edward J. Kondracki	20,604 Telephone 703/903-9	000				
Signature Silvary Agent Signature (Attorney/Agent) 20,604 Feb. 8, 2000						

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